

**UNITED STATES NATIONAL STAGE WORKSHEET (DO/EO)**

**Charitta Burt, Paralegal**

U. S. Application No. \_\_\_\_\_

Publication Date 7.15.00

Publication No. WO 2004, 059534 PCT/RO/101 \_\_\_\_\_

Copy of ISR EP, Copy of IPER \_\_\_\_\_

Assignee information: \_\_\_\_\_

Priority Info: Country EP No. 02080542.0 date 12.30.02 **MORE**

Correspondence checked: \_\_\_\_\_ deposit account \_\_\_\_\_

Inventor Residence city: \_\_\_\_\_, state and/or country \_\_\_\_\_ citizenship: \_\_\_\_\_

International Application No. PCT IB2003, 005711 Language EN

Copy in International Application: ☒; Translation: yes \_\_\_\_\_ no \_\_\_\_\_ Spec.pg no. \_\_\_\_\_

371 Filing Fees: 900; US IPER meets Art. 33(2)-(3) Low fee applies: \_\_\_\_\_

Total Claims: 10 Chargeable 10 Independent 3 multiple 46

Number of drawing Sheets: + Foreign language: \_\_\_\_\_

Oath/Declaration: ☒ signed ☐ unsigned ☐ defective ☐ completed 6.27.05 Power of Attorney: \_\_\_\_\_

Small entity fee: \_\_\_\_\_ SME document yes \_\_\_\_\_ no \_\_\_\_\_

Bio Seq. Diskette: \_\_\_\_\_ entered \_\_\_\_\_ Bio Seq. Listing: \_\_\_\_\_ statement \_\_\_\_\_

Article 19 Amendment: \_\_\_\_\_; replaced by Article 34 Amdt. \_\_\_\_\_

Copy ISA References \_\_\_\_\_

Copy of IPER: \_\_\_\_\_; Annexes: \_\_\_\_\_ entered \_\_\_\_\_ not entered \_\_\_\_\_ Text sequence improper \_\_\_\_\_

Preliminary Amendment(s): \_\_\_\_\_ date: \_\_\_\_\_; 2<sup>nd</sup> amendment date \_\_\_\_\_

IDS: ☒ DATE: 6.27.05 2<sup>nd</sup> \_\_\_\_\_ DATE \_\_\_\_\_

Request for Immediate Examination: \_\_\_\_\_

Substitute Specification: \_\_\_\_\_ date: \_\_\_\_\_

Assignment: ☒ forwarded to Assignment branch date: \_\_\_\_\_

Priority Document(s): ☒ Number of copies included +

Date of 35 USC Receipt of Request: 6.27.05 **Notes:** \_\_\_\_\_

Date Completion USC 371 Requirements: 6.27.05 |

Notice of Missing Requirements: \_\_\_\_\_ |

Notice of Defective Response: \_\_\_\_\_ |

Notice of Acceptance: \_\_\_\_\_ |

Notice of Abandonment: \_\_\_\_\_ Petition to Revive: \_\_\_\_\_

Other forms: \_\_\_\_\_ Extension of time: Number of months \_\_\_\_\_